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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Irene First name Baby Middle name McNeal Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3588	

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Case number (if known)

Debtor 1 Irene Baby McNeal

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs. Business name(s)			
		Business name(s)				
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		1165 N Milwaukee Ave Apt 1409 Chicago, IL 60642				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Cook County	County			
		·	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing	Check one:	Check one:			
this district to file for bankruptcy		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Case number (if known) Debtor 1 Irene Baby McNeal

art	2: Tell the Court About	Your Ba	nkruptcy C	ase			
	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by</i> page 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box.	
	choosing to file under	■ Cha	apter 7				
		☐ Cha	apter 11				
		☐ Cha	apter 12				
		☐ Cha	apter 13				
•	How you will pay the fee	a	will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.				
					allments. If you choose this options (Official Form 103A).	on, sign and attach the Application for Individuals to Pay	
			request that	at my fee be wai	ived (You may request this option	n only if you are filing for Chapter 7. By law, a judge may,	
		a	applies to yo	ur family size and	d you are unable to pay the fee ir	our income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out cial Form 103B) and file it with your petition.	
	Have you filed for bankruptcy within the	■ No.					
	last 8 years?	☐ Yes					
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
).	Are any bankruptcy cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes					
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
1.	Do you rent your residence?	■ No.	Go to	line 12.			
	residence :	☐ Yes	. Has yo	our landlord obtai	ined an eviction judgment agains	st you and do you want to stay in your residence?	
				No. Go to line 1	2.		
				Yes. Fill out <i>Init</i> bankruptcy peti	tial Statement About an Eviction .	Judgment Against You (Form 101A) and file it with this	

Debtor 1 Irene Baby McNeal Document Page 4 of 56 Case number (if known)

ar	Report About Any Bu	sinesses `	You Own	as a Sole Propriet	or		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of busi	ness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State	e & ZIP Code		
	it to this petition.		Check	the appropriate box	c to describe your business:		
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))		
				☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))			
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set apprines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, state tions, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the proU.S.C. 1116(1)(B).				
	For a definition of small	■ No.	I am n	ot filing under Chap	ter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.			
		☐ Yes.	I am fi	ling under Chapter 1	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
ar	t 4: Report if You Own or	Have Any	Hazardo	us Property or Any	Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	Yes.	What is t	he hazard?			
public health or safety? Or do you own any property that needs			iate attention is				
	immediate attention?		needed,	why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?			
					Number, Street, City, State & Zip Code		

Debtor 1 Irene Baby McNeal

Document Page 5 of 56 Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-17467 Doc 1 Filed 05/24/16 Entered 05/24/16 16:28:02 Desc Main Document Page 6 of 56 Case number (if known) Debtor 1 Irene Baby McNeal Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Irene Baby McNeal

Irene Baby McNeal Signature of Debtor 1

Executed on May 24, 2016

MM / DD / YYYY

Signature of Debtor 2

MM / DD / YYYY

Executed on

Case 16-17467 Doc 1 Filed 05/24/16 Entered 05/24/16 16:28:02 Desc Main Document Page 7 of 56

Debtor 1 Irene Baby McNeal Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 -	G. Stahulak Attorney for Debtor	Date	May 24, 2016 MM / DD / YYYY					
Thomas G.	Stahulak							
Stahulak & Firm name	Stahulak & Associates, L.L.C. / GetFiled							
53 W. Jackson Blvd., Suite 652 Chicago, IL 60604 Number, Street, City, State & ZIP Code								
Contact phone	(312) 662-1480	Email address	ecf@stahulakandassociates.com					
6288620	ate							

		1700.11111	an Faue o urbu	
Fill in this infor	mation to identify your	case:		
Debtor 1	Irene Baby McNea	ıl		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Che
				ame

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	4,200.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	4,200.00
Pa	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	8,032.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	37,786.07
	Your total liabilities	\$	45,818.07
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,283.32
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,345.00
Pa	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

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Case number (if known) Debtor 1 Irene Baby McNeal

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

2,774.98 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tot	tal claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	25,499.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	25,499.00

		Docun	nent Page 10 of 56		
Fill in this in	formation to identify your	case and this filing:			
Debtor 1	Irene Baby McNe	al			
DODIO! 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
Case number	r				☐ Check if this is an
					amended filing
Official F	Form 106A/B				
-		4			
Sched	ule A/B: Prop	erty			12/15
hink it fits bes nformation. If I Answer every o	t. Be as complete and accura more space is needed, attach question.	ate as possible. If two man a a separate sheet to this f	y once. If an asset fits in more than or ried people are filing together, both a orm. On the top of any additional page.	are equally responsible for s	upplying correct
Part 1: Descr	ribe Each Residence, Building	g, Land, or Other Real Est	ate You Own or Have an Interest In		
. Do you own	or have any legal or equitabl	e interest in any residenc	e, building, land, or similar property?		
_					
No. Go to	Part 2.				
☐ Yes. Whe	ere is the property?				
Dowt 2	ribe Your Vehicles				
Part 2: Descr	Tibe rour vehicles				
□ No ■ Yes	s, trucks, tractors, sport u	unity verticles, motorcy	cies		
3.1 Make:	Suzuki	Who has an in	terest in the property? Check one	Do not deduct secured of	claims or exemptions. Put
	Forenza				red claims on Schedule D: nims Secured by Property.
Model:	2005	Debtor 1 on	•	Creditors write have Cla	ins Secured by Property.
Year:		Debtor 2 on Debtor 1 an	•	Current value of the entire property?	Current value of the portion you own?
	nformation:		· · · · · · · · · · · · · · · · · · ·	entire property:	portion you own:
	r to Surrender.	At least one	of the debtors and another		
Dobto	r to Carronaor.	☐ Check if th	s is community property	\$3,800.00	\$3,800.00
		(see instruction	ons)		
Examples: I ■ No □ Yes 5 Add the d .pages you	Boats, trailers, motors, pers	you own for all of your Write that number he	onal vehicles, other vehicles, an ressels, snowmobiles, motorcycle a entries from Part 2, including are	accessories ny entries for	\$3,800.00
	or have any legal or equit		the following items?		Current value of the
_ = , , , , , , , , , , , , , , , , , ,	and any logar or oquit	and the second s	g		portion you own? Do not deduct secured claims or exemptions.
Household	d goods and furnishings				The contribution of

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

Debtor 1	Case 16-17467 Irene Baby McNeal	Doc 1	Filed 05/24/16 Document	Entered 05/24/16 16:28:02 Page 11 of 56 Case number (if known)	Desc Main
_	. Describe				
– 165.					Ф000 00
	Used pe	ersonal hou	sehold goods/items a	nd furniture	\$300.00
■ No				oment; computers, printers, scanners; music c	ollections; electronic devices
<i>Examp</i> ■ No	ibles of value bles: Antiques and figurines; other collections, memo			oks, pictures, or other art objects; stamp, coin	or baseball card collections;
Examp. ■ No	nent for sports and hobbie ples: Sports, photographic, ex musical instruments Describe		other hobby equipment;	bicycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
■ No	ms aples: Pistols, rifles, shotguns Describe	s, ammunitior	n, and related equipmen	t	
□ No	es aples: Everyday clothes, furs . Describe	, leather coat	s, designer wear, shoes	, accessories	
	Used pe	ersonal clotl	ning and accessories		\$60.00
 No □ Yes. 13. Non-fa Exam, □ No □ Yes. 14. Any of □ No 	nples: Everyday jewelry, cost Describe nples: Dogs, cats, birds, hors Describe	es old items yo		ding rings, heirloom jewelry, watches, gems, o	gold, silver
	the dollar value of all of your art 3. Write that number he			ny entries for pages you have attached	\$360.00
	escribe Your Financial Assets wn or have any legal or eq		est in any of the follow	ring?	Current value of the
					portion you own? Do not deduct secured claims or exemptions.
□ No	aples: Money you have in you			osit box, and on hand when you file your petiti	on
Official For			Schedule A/B: F		page 2

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Case number (if known) Document Debtor 1 Irene Baby McNeal Cash on hand \$20.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... Citibank \$20.00 Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. Nο ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No ☐ Yes. Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

■ No

☐ Yes. Give specific information about them...

☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

■ No

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Debtor	1 Irene Baby McNeal		Document	Case number (if known)	
□ Y	es. Give specific information	on about them			
Money	or property owed to you'	?			Current value of the portion you own? Do not deduct secured claims or exemptions.
■ N	-	n about them, inc	cluding whether you alre	ady filed the returns and the tax years	
Exa ■ N	•	,,,,	usal support, child suppo	ort, maintenance, divorce settlement, property	settlement
Exa ■ N	benefits; unpaid lo	ability insurance pans you made to		efits, sick pay, vacation pay, workers' comper	nsation, Social Security
Exa ■ N	o es. Name the insurance co	or life insurance; h		HSA); credit, homeowner's, or renter's insurar Beneficiary:	Surrender or refund value:
If y sor ■ N	neone has died.	living trust, expec		d surance policy, or are currently entitled to rece	eive property because
Exa ■ N	ims against third parties, amples: Accidents, employi o es. Describe each claim	ment disputes, in		t or made a demand for payment to sue	
■ N	=		every nature, including	g counterclaims of the debtor and rights to	set off claims
35. Any	financial assets you did	not already list			
■ N □ Y	o es. Give specific information	on			
				ny entries for pages you have attached	\$40.00
Part 5:	Describe Any Business-Rela	ated Property You	Own or Have an Interest I	n. List any real estate in Part 1.	
-	ou own or have any legal or	equitable interest	in any business-related p	roperty?	

Official Form 106A/B Schedule A/B: Property page 4

 \square Yes. Go to line 38.

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Case number (if known) Document Debtor 1 Irene Baby McNeal Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$3.800.00 57. Part 3: Total personal and household items, line 15 \$360.00 Part 4: Total financial assets, line 36 \$40.00 58. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 \$0.00 61. Total personal property. Add lines 56 through 61... \$4,200.00 \$4,200.00 Copy personal property total

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$4,200.00

	l in this inform	nation to identify your case:			
De	btor 1	Irene Baby McNeal First Name	Middle Name	Last Name	
De	btor 2	Thot Name	Widale Hallie	Edde Hamo	
(Sp	ouse if, filing)	First Name	Middle Name	Last Name	
Un	ited States Ban	nkruptcy Court for the: NO	RTHERN DISTRICT OF	ILLINOIS	
	se number				
(if k	nown)				☐ Check if this is an amended filing
_	(C) - 1 - 1	4000			
	fficial For			_	
30	chedule	e C: The Prope	erty You Cla	im as Exempt	4/1
ne ee	property you lis	sted on <i>Schedule A/B: Propel</i> d attach to this page as many	rty (Official Form 106A/B)	as your source, list the property th	sible for supplying correct information. Usin nat you claim as exempt. If more space is of any additional pages, write your name a
pe ny un xe	cific dollar am applicable sta ds—may be ur mption to a pa	nount as exempt. Alternative atutory limit. Some exemption in the contract of	ely, you may claim the foots—such as those for lowever, if you claim ar	ull fair market value of the proper health aids, rights to receive ce nexemption of 100% of fair mark	claim. One way of doing so is to state a erty being exempted up to the amount of ertain benefits, and tax-exempt retirement et value under a law that limits the amount, your exemption would be limited
o t					
	rt 1: Identify	y the Property You Claim as	s Exempt		
Pa				n if your spouse is filing with you.	
Pa	Which set of		ng? Check one only, eve	, ,	
Pa	Which set of You are cla	exemptions are you claiming	ng? Check one only, eve	, ,	
Ра 1.	Which set of ■ You are cla □ You are cla	exemptions are you claiming aiming state and federal nonbaiming federal exemptions.	ng? Check one only, eve ankruptcy exemptions. 1 U.S.C. § 522(b)(2)	, ,	w.
Ра 1.	Which set of ■ You are cla □ You are cla For any prope Brief description	exemptions are you claiming state and federal nonbaiming federal exemptions. 1 erty you list on Schedule A on of the property and line on	ang? Check one only, even ankruptcy exemptions. 1 U.S.C. § 522(b)(2) /B that you claim as execution of the	11 U.S.C. § 522(b)(3)	
Ра 1.	Which set of ■ You are cla □ You are cla For any prope Brief description	exemptions are you claiming state and federal nonbaiming federal exemptions. 1 erty you list on Schedule A	ang? Check one only, even ankruptcy exemptions. 1 U.S.C. § 522(b)(2) /B that you claim as exemptions.	11 U.S.C. § 522(b)(3) empt, fill in the information below	m Specific laws that allow exemption
Ра 1.	Which set of ■ You are cla □ You are cla For any prope Brief description Schedule A/B t Used person	exemptions are you claiming aiming state and federal nonbaiming federal exemptions. 1 erty you list on Schedule A on of the property and line on that lists this property	ng? Check one only, even ankruptcy exemptions. 1 U.S.C. § 522(b)(2) /B that you claim as execution of the portion you own Copy the value from Schedule A/B	11 U.S.C. § 522(b)(3) empt, fill in the information below Amount of the exemption you claim	m Specific laws that allow exemption tion.
Ра 1.	Which set of ■ You are cla □ You are cla For any prope Brief description Schedule A/B to Used personal and furniture	exemptions are you claiming aiming state and federal nonbaiming federal exemptions. 1 erty you list on Schedule A on of the property and line on that lists this property	ankruptcy exemptions. 1 U.S.C. § 522(b)(2) /B that you claim as execute current value of the portion you own Copy the value from Schedule A/B	empt, fill in the information below Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption tion. 735 ILCS 5/12-1001(b) up to
Ра 1.	Which set of ■ You are cla □ You are cla For any prope Brief descriptic Schedule A/B t Used person and furniture Line from Sch Used person	exemptions are you claiming aiming state and federal nonbaiming federal exemptions. 1 erty you list on Schedule A on of the property and line on that lists this property mal household goods/items are dule A/B: 6.1	ng? Check one only, even ankruptcy exemptions. 1 U.S.C. § 522(b)(2) /B that you claim as execute Current value of the portion you own Copy the value from Schedule A/B \$300.00	empt, fill in the information below Amount of the exemption you claim Check only one box for each exemption \$300 100% of fair market value, any applicable statutory limits	Specific laws that allow exemption tion. 735 ILCS 5/12-1001(b) up to
Ра 1.	Which set of ■ You are cla □ You are cla For any prope Brief descriptic Schedule A/B t Used person and furniture Line from Sch Used person	exemptions are you claiming aiming state and federal nonbaiming federal exemptions. 1 erty you list on Schedule A on of the property and line on that lists this property	ankruptcy exemptions. 1 U.S.C. § 522(b)(2) /B that you claim as exc Current value of the portion you own Copy the value from Schedule A/B \$300.00	empt, fill in the information below Amount of the exemption you claim Check only one box for each exemption \$300 100% of fair market value, any applicable statutory limits	m Specific laws that allow exemption tion. 735 ILCS 5/12-1001(b) up to nit 735 ILCS 5/12-1001(a) up to
Ра 1.	Which set of ■ You are cla □ You are cla For any prope Brief descriptic Schedule A/B t Used person and furniture Line from Sch Used person Line from Sch	exemptions are you claiming state and federal nonbaiming state and federal nonbaiming federal exemptions. 1 erty you list on Schedule A on of the property and line on that lists this property anal household goods/items are dule A/B: 6.1 anal clothing and accessoric fedule A/B: 11.1	ankruptcy exemptions. 1 U.S.C. § 522(b)(2) // B that you claim as exc Current value of the portion you own Copy the value from Schedule A/B \$ \$300.00	empt, fill in the information below Amount of the exemption you claim Check only one box for each exemption \$300 100% of fair market value, any applicable statutory lime \$600 100% of fair market value, any applicable statutory lime	Specific laws that allow exemption tion. 735 ILCS 5/12-1001(b) up to nit 735 ILCS 5/12-1001(a) up to nit
Ра 1.	Which set of ■ You are cla □ You are cla For any prope Brief descriptic Schedule A/B t Used person and furniture Line from Sch Used person Line from Sch	exemptions are you claiming state and federal nonbaiming state and federal nonbaiming federal exemptions. 1 erty you list on Schedule A on of the property and line on that lists this property anal household goods/items are dule A/B: 6.1 anal clothing and accessoric fedule A/B: 11.1	ankruptcy exemptions. 1 U.S.C. § 522(b)(2) /B that you claim as exc Current value of the portion you own Copy the value from Schedule A/B \$300.00	empt, fill in the information below Amount of the exemption you claim Check only one box for each exemption \$300 100% of fair market value, any applicable statutory lime \$600 100% of fair market value, any applicable statutory lime	Specific laws that allow exemption tion. 735 ILCS 5/12-1001(b) up to nit 735 ILCS 5/12-1001(a) up to nit 735 ILCS 5/12-1001(b) up to nit 735 ILCS 5/12-1001(b)
Ра 1.	Which set of You are cla You are cla For any propose Brief descriptions Schedule A/B to Used personn and furniture Line from Sche Used personn Line from Sche Cash on han Line from Sche Checking: Ci	exemptions are you claiming state and federal nonbaiming state and federal nonbaiming federal exemptions. 1 erty you list on Schedule A on of the property and line on that lists this property and household goods/items and household goods/items are dule A/B: 6.1 and clothing and accessoric pedule A/B: 11.1	ankruptcy exemptions. 1 U.S.C. § 522(b)(2) // B that you claim as exc Current value of the portion you own Copy the value from Schedule A/B \$ \$300.00	ampt, fill in the information below Amount of the exemption you claim Check only one box for each exemption \$300 100% of fair market value, any applicable statutory lime \$600 100% of fair market value, any applicable statutory lime \$200 100% of fair market value, any applicable statutory lime	Specific laws that allow exemption tion. 735 ILCS 5/12-1001(b) up to nit 735 ILCS 5/12-1001(a) up to nit 735 ILCS 5/12-1001(b) up to nit 735 ILCS 5/12-1001(b)

■ No

Official Form 106C

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

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Page 16 of 56 Case number (if known) Debtor 1 Irene Baby McNeal

Case	16-17467	Doc 1 Filed 05/24/16 Document	Entere Page 1	ed 05/24/16 16:2 7 of 56	28:02 Desc I	Main
Fill in this information	on to identify you		1 11(1)	7 (71 - 70)		
Debtor 1	rene Baby McNe	eal				
	irst Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing) F	irst Name	Middle Name	Last Name			
United States Bankru						
Office Glates Barikra	picy Court for the.	NORTHERN BIOTRIOT OF IE	LIIVOIO			
Case number					☐ Chec	k if this is an
()						ded filing
Official Forms 4	000					
Official Form 1		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	C	al lass Duana audi	_	
scneaule D:	Creditors	Who Have Claims	Secure	a by Property	<u>/</u>	12/15
Be as complete and acc s needed, copy the Adc number (if known).	curate as possible. I litional Page, fill it d	If two married people are filing togetl out, number the entries, and attach it	ner, both are e to this form. C	qually responsible for su On the top of any addition	pplying correct inform al pages, write your na	ation. If more space ame and case
. Do any creditors have	e claims secured by	y your property?				
☐ No. Check this	box and submit the	his form to the court with your other	r schedules. \	ou have nothing else to	report on this form.	
Yes. Fill in all of	of the information	below.				
Part 1: List All Se	cured Claims					
		more than one secured claim, list the cre			Column B	Column C
		a particular claim, list the other creditor cal order according to the creditor's nan		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Santander Co	nsumer USA_	Describe the property that secures		\$8,032.00	\$3,800.00	\$0.00
Creditor's Name		2005 Suzuki Forenza 100,000 Debtor to Surrender.	0 miles			
Po Box 96124 Fort Worth, TX	-	As of the date you file, the claim is: apply. Contingent	Check all that			
Number, Street, City,	State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as car loan)	mortgage or se	cured		
☐ Debtor 2 only ☐ Debtor 1 and Debtor	2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
At least one of the de	•	☐ Judgment lien from a lawsuit	criariic 3 lierr)			
☐ At least one of the decicls and another ☐ Check if this claim relates to a community debt		Other (including a right to offset)	Purchase I	Money Security		
	Opened 6/01/12 Last Active		. 1000			
Date debt was incurred	11/17/15	Last 4 digits of account num	1000			

Add the dollar value of your entries in Column A on this page. Write that number here: \$8,032.00 If this is the last page of your form, add the dollar value totals from all pages. \$8,032.00 Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

		Document	Page 1	8 of 56	
Fill in this	information to identify your ca	ase:			
Debtor 1	Irene Baby McNeal				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT OF I	LLINOIS		
Case numb (if known)	per				☐ Check if this is an amended filing
Schedu	Form 106E/F lle E/F: Creditors WI				12/15
any executo Schedule G: Schedule D: left. Attach t	ry contracts or unexpired leases to Executory Contracts and Unexpir Creditors Who Have Claims Secu	hat could result in a claim. Also red Leases (Official Form 106G). red by Property. If more space i	list executory of Do not include s needed, copy	Part 2 for creditors with NONPRIORI' contracts on Schedule A/B: Property any creditors with partially secured the Part you need, fill it out, number do not file that Part. On the top of an	(Official Form 106A/B) and on claims that are listed in the entries in the boxes on the
Part 1:	List All of Your PRIORITY Uns	ecured Claims			
-	creditors have priority unsecured	claims against you?			
No.	Go to Part 2.				
☐ Yes.					
Part 2:	List All of Your NONPRIORITY	Unsecured Claims			
3. Do any	creditors have nonpriority unsecu	red claims against you?			
□ No.	You have nothing to report in this pa	rt. Submit this form to the court wit	h your other sche	edules.	
Yes.					
unsecur	ed claim, list the creditor separately	for each claim. For each claim liste	ed, identify what t	b holds each claim. If a creditor has m ype of claim it is. Do not list claims alre three nonpriority unsecured claims fill	eady included in Part 1. If more
					Total claim
	nerican Financial Cre	Last 4 digits of ac	count number	0805	\$33.00
10	333 N Meridian St Ste dianapolis, IN 46290	When was the de	bt incurred?	Opened 1/01/14	
Nu	mber Street City State Zlp Code	As of the date you	u file, the claim i	s: Check all that apply	
_	o incurred the debt? Check one.	_			
_	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed	DITY	l alaine.	
	At least one of the debtors and anot	П от т	ORITY Unsecured	i ciaim:	
del		☐ Obligations aris	sing out of a sepa	ration agreement or divorce that you di	id not
_	he claim subject to offset?	report as priority cl			
	No	•	•	g plans, and other similar debts	
	Yes	Other. Specify	Collection A	ttorney Sme Pathologists	

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Deblo	Irene Baby McNeal	Case number (if know)	
4.2	Caine & Weiner Nonpriority Creditor's Name	Last 4 digits of account number 8473	\$162.00
	Po Box 5010	When was the debt incurred? Opened 4/01/14	
	Woodland Hills, CA 91365	_ 	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Collection Attorney Enterprise Rent A Car 15dd	
4.3	Carmax Service Center Nonpriority Creditor's Name	Last 4 digits of account number 8762	\$82.30
	101 N Wolf Rd, Suite 8 Hillside, IL 60162	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Collection	
4.4	Central Credit Services LLC	Last 4 digits of account number 8395	\$8,095.00
	Nonpriority Creditor's Name 20 Corporate Hills Dr	When was the debt incurred?	·
	Saint Charles, MO 63301-3749 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the diam is. Offect all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	■ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
		Educational for Navient - NOTICE ONLY	

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Deb	tor 1 Irene Baby McNeal	Case number (if know)	
4.5	Citibank	Last 4 digits of account number	\$1,000.00
	Nonpriority Creditor's Name P.O. box 6500 Sioux Falls, SD 57117	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	
4.6	Comcast	Last 4 digits of account number 2675	\$199.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	1255 W. North Ave Chicago, IL 60622	when was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes	Other. Specify Collection	
	_ 100	Other. Specify	
4.7	ComEd	Last 4 digits of account number 0235	\$730.52
	Nonpriority Creditor's Name P.O. Box 805379	When was the debt incurred?	
	Chicago, IL 60680 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		
	□ 169	Other. Specify Utility	

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Debto	or 1 Irene Baby McNeal		Case number (if know)	
4.8	Diversified Consultant	Last 4 digits of account number	2238	\$160.00
	Nonpriority Creditor's Name Dci	When was the debt incurred?	Opened 12/01/15	
	Po Box 551268		<u> </u>	
	Jacksonville, FL 32255			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify Collection A	Attorney At T	
4.9	ERC/Enhanced Recovery Corp Nonpriority Creditor's Name	Last 4 digits of account number	1524	\$80.00
	8014 Bayberry Rd Jacksonville, FL 32256	When was the debt incurred?	Opened 10/01/15	
	Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	■ Other Specify Collection A		
4.1 0	Figis	Last 4 digits of account number	8189	\$90.00
	Nonpriority Creditor's Name 3200 S Central Ave	When was the debt incurred?		
	Marshfield, WI 54449 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	• ,		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	0 0 1	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin	ng pians, and other similar debts	
	Yes	Other. Specify Collection		

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Case number (if know)

DCDI	or refle baby McNear	Odde Halliber (II know)	
4.1 1	GC Service	Last 4 digits of account number 3547	\$7,975.00
	Nonpriority Creditor's Name 6330 Gulfton Street	When was the debt incurred?	·
	Houston, TX 77081-4441 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	□ Debtor 2 only	☐ Unliquidated	
		□ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	■ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
		_	
	Yes	Other. Specify	
		Educational - Navient Solutions - Notice Only	
4.1 2	Great Lakes Specialty Finance, Inc. Nonpriority Creditor's Name	Last 4 digits of account number 5764	\$1,649.00
	dba: Check 'n Go	When was the debt incurred?	
	800 N Kedzie		
	Chicago, IL 60651		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Loan	
4.1 3	H&R Block	Last 4 digits of account number 9918	\$276.00
<u> </u>	Nonpriority Creditor's Name		· · · · · · · · · · · · · · · · · · ·
	PO Box 677463	When was the debt incurred?	
	Dallas, TX 75267 Number Street City State Zlp Code	As of the data you file the plain in Cheek all that each	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	П	
		□ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	□ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Service Charge	

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Debt	or 1 Irene Baby McNeal	Case number (if know)	
4.1 4	Massey's Nonpriority Creditor's Name	Last 4 digits of account number 35A2	\$20.00
	PO Box 2822 Monroe, WI 53566	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Charge	
4.1	Med Business Bureau	Last 4 digits of account number 0401	\$94.00
5	Nonpriority Creditor's Name	Last 4 digits of account number 0401	\$81.00
	1460 Renaissance Dr Suite 400	When was the debt incurred? Opened 10/01/13	
	Park Ridge, IL 60068		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_		
	■ Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection Attorney Med1 02 Rm Anesthesia	
4.1	Northwest Pulmonary Assoc	Last 4 digits of account number 7332	\$20.00
6	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ20.00
	7447 W Talcott Ave Suite 542	When was the debt incurred?	
	Chicago, IL 60631	_	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	<u> </u>		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐Yes	■ Other. Specify Medical	

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Case number (if know)

Debtor	1 Irene Baby McNeal	Case number (if know)	
4.1	Paul V Fahrenbach, MD Nonpriority Creditor's Name	Last 4 digits of account number 2124	\$72.00
	7447 W Talcott Suite 209	When was the debt incurred?	
	Chicago, IL 60631 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	
4.1	Pay As You Go	Last 4 digits of account number	\$800.00
8	Nonpriority Creditor's Name 800 N. Kedzie	When was the debt incurred?	Ψοσοίσο
	Chicago, IL 60651		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Payday Loan	
4.1	Peoples Gas	Last 4 digits of account number 3183	\$900.00
9	Nonpriority Creditor's Name	Last 4 digits of account number	Ψοσοισσ
	C/O Bankruptcy Department 130 E. Randoph Drive	When was the debt incurred?	
	Chicago, IL 60602 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Utility	

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Case number (if know)

Debto	or 1 Irene Baby McNeal	Case number (if know)	
4.2	PNC Bank	Last 4 digits of account number 8941	\$100.00
	Nonpriority Creditor's Name 2730 Liberty Ave	When was the debt incurred?	
	Pittsburgh, PA 15222 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Contingent	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset? ■	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No □ Yes	□ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify NSF	
4.2	Presence Health	Last 4 digits of account number 5200	\$300.00
	Nonpriority Creditor's Name 100 North River Road Des Plaines, IL 60016	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No □ Yes	□ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical	
4.2	RM Anesthesia LLC Nonpriority Creditor's Name	Last 4 digits of account number 7400	\$326.00
	PO Box 631 Lake Forest, IL 60045 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	

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Case number (if know) Debtor 1 Irene Baby McNeal 4.2 RMC Pathology Associates 9700 \$28.00 Last 4 digits of account number 3 Nonpriority Creditor's Name 520 E 22nd St When was the debt incurred? Lombard, IL 60148 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Medical 4.2 Saints Mary and Elizabeth 6659 \$11.25 Last 4 digits of account number Nonpriority Creditor's Name Medical Center When was the debt incurred? 1117 Paysphere Circle Chicago, IL 60674 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Medical 4.2 Sallie Mae - Dept. of Education 3951 \$9,429.00 5 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 740351 When was the debt incurred? Atlanta, GA 30374 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ☐ Other. Specify

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Irene Baby McNeal	Case	number (if know)	
Social Security Administration	Last 4 digits of account number 0000)	\$500.00
Nonpriority Creditor's Name P.O. Box 3430	When was the debt incurred?		
Philadelphia, PA 19122 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Chec	k all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreeort as priority claims	greement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing plans,	and other similar debts	
☐ Yes	Other. Specify Overpayment		
	9999		*
Sylvan Learning Center Nonpriority Creditor's Name	Last 4 digits of account number 0000		\$100.00
610 S Maple Suite 1550	When was the debt incurred?		
Oak Park, IL 60304	_		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Chec	k all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreeport as priority claims	greement or divorce that you did not	
■ No	\square Debts to pension or profit-sharing plans,	and other similar debts	
Yes	Other. Specify Collection		
Synchrony Bank/Home Shopping	Last 4 digits of account number 8051		\$1.00
Nonpriority Creditor's Name Attn: Bankruptcy	Oper	ned 4/01/06 Last Active	
Po Box 103104 Roswell, GA 30076	When was the debt incurred? 12/19		
Number Street City State Zlp Code	As of the date you file, the claim is: Chec	k all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation a	greement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	☐ Debts to pension or profit-sharing plans,	and other similar debts	
Yes	■ Other. Specify Charge Account		

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Case number (if know) Debtor 1 Irene Baby McNeal 4.2 \$20.00 Synchrony Bank/TJX 7988 Last 4 digits of account number 9 Nonpriority Creditor's Name Attn: Bankruptcy Opened 9/01/15 Last Active Po Box 103104 When was the debt incurred? 4/20/16 Roswell, GA 30076 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.3 TCF Bank \$400.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 800 Burr Ridge Pkwy When was the debt incurred? Burr Ridge, IL 60527 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify NSF Fees 4.3 Unifund CCR Partner 9134 \$3,646.00 Last 4 digits of account number Nonpriority Creditor's Name c/o Blatt Hasenmiller When was the debt incurred? 125 S. Wacker Dr #400 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Judgment ☐ Yes

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liene baby McNear	- Case Hamber (II know)	
US Department of the Treasury	Last 4 digits of account number 9259	\$500.00
Nonpriority Creditor's Name PO Box 1686	When was the debt incurred?	
Birmingham, AL 35201		
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans	
Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Overpayment of Benefit for Social Security	
Yes	Other Specify Admin	
Port 2	ht That Van Alasa da Lista d	
Part 3: List Others to Be Notified About a De	·	
is trying to collect from you for a debt you owe to so	about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example omeone else, list the original creditor in Parts 1 or 2, then list the collection agency I at you listed in Parts 1 or 2, list the additional creditors here. If you do not have additor submit this page.	here. Similarly, if you
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
Alicare PO BOX 5435	Line <u>4.23</u> of (<i>Check one</i>):	
White Plains, NY 10602	■ Part 2: Creditors with Nonpriority Unsecured C	aims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
Alicare	Line $\underline{4.22}$ of (<i>Check one</i>): \square Part 1: Creditors with Priority Unsecured Claim	s
PO BOX 5435 White Plains, NY 10602	■ Part 2: Creditors with Nonpriority Unsecured C	laims
Wille Figure 5, 141 10002	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
Alicare	Line 4.21 of (Check one):	s
PO BOX 5435	■ Part 2: Creditors with Nonpriority Unsecured C	laims
White Plains, NY 10602	Last 4 digits of account number	
Name and Address Chase Receivables	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.10</u> of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claim	ie.
1247 Broadway	Part 2: Creditors with Nonpriority Unsecured Ci	
Sonoma, CA 95476		airis
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
LJ Ross Associates Inc P.O. Box 6099	Line <u>4.7</u> of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claim	
Jackson, MI 49204	Part 2: Creditors with Nonpriority Unsecured Co	aims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
Social Security Administration	Line $\underline{4.32}$ of (Check one):	S
Great Lakes Program Service Ctr.	■ Part 2: Creditors with Nonpriority Unsecured C	laims
600 W. Madison St. Chicago, IL 60661-2474		
	Last 4 digits of account number	
Part 4: Add the Amounts for Each Type of U	nsecured Claim	
	ims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add	the amounts for each
type of unsecured claim.		
	Total Claim	
6a. Domestic support obligations	s 6a. \$	

Official Form 106 E/F

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Debtor 1 Irene Baby McNeal

					0.00
Total					0.00
claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				7	Total Claim
	6f.	Student loans	6f.	\$	25,499.00
Total claims					
om Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	12,287.07
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	37,786.07

Fill in this infor	mation to identify your	case:		
Debtor 1	Irene Baby McNea			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

F	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Ms. Thomas 1165 N Milwaukee Ave Chicago, IL 60642	Monthly Apartment Lease

		Docume	<u>ent Page 32 d</u>	ot 56	
Fill in thi	is information to identify you	r case:			
Debtor 1	Irana Dahu MaNa				
Deploi	Irene Baby McNe	Middle Name	Last Name		
Debtor 2					
(Spouse if, f		Middle Name	Last Name	-	
United St	tates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Office Of	ates bankruptey countries the.		01 122.11010		
Case nur	mber				
(if known)					☐ Check if this is an
					amended filing
Officia	al Form 106H				
Sche	dule H: Your Cod	debtors			12/15
ill it out, our nam	and number the entries in the ne and case number (if known	e boxes on the left. Attach n). Answer every question	the Additional Page :	to this page. On the to	needed, copy the Additional Page, p of any Additional Pages, write
1. Do	o you have any codebtors? (I	f you are filing a joint case,	do not list either spouse	e as a codebtor.	
■ No					
Arizo No Ye 3. In Co in lir Forn	ne 2 again as a codebtor only	a, Nevada, New Mexico, Pu ouse, or legal equivalent live otors. Do not include your if that person is a guaran	erto Rico, Texas, Wash with you at the time? spouse as a codebto tor or cosigner. Make	ington, and Wisconsin.) r if your spouse is filin sure you have listed t	
out				0 1 0 7	
	Column 1: Your codebtor Name, Number, Street, City, State and I	ZIP Code		Column 2: The cro	editor to whom you owe the debt es that apply:
				ooo an oonoddi	~pp.).
3.1				☐ Schedule D, lin	ne
	Name			☐ Schedule E/F,	line
				☐ Schedule G, Iir	ne
	Number Street				
	City	State	ZIP Code		
3.2	News			Schedule D, lin	
	Name			☐ Schedule E/F,	
				☐ Schedule G, lir	ne
	Number Street			_	
	City	State	ZIP Code		

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						_				
	in this information to identify your cotor 1 Irene Baby N									
Del	otor 2	1011001								
	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS							
Cas	se number nown)		-				if this is:			
									g postpetition ollowing date:	chapter
	fficial Form 106l					M	M / DD/ Y	YYY		
	chedule I: Your Inc			(5.1)						12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. The describe Employment in your employment	ır spouse is not filing w	ith you, do not incluional pages, write y	ude infor	mati	ion about d case nui	your spo mber (if I	ouse. If mo known). A	ore space is answer every	needed,
	information.		Debtor 1						ling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed				☐ Emplo	-		
	employers.	Occupation	Soil							
	Include part-time, seasonal, or self-employed work.	Employer's name	Crothall Laundry	y Service	Э					
	Occupation may include student or homemaker, if it applies.	Employer's address	1500 Liberty Ric Wayne, PA 190							
		How long employed t	here? 4 Years	s			_			
Par	t 2: Give Details About Mor	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to	report for	any	line, write	\$0 in the	space. Inc	clude your noi	n-filing
	u or your non-filing spouse have me e space, attach a separate sheet to		ombine the information	on for all	empl	oyers for t	hat perso	n on the li	nes below. If	you need
						For Deb	tor 1		btor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	2,3	371.98	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	2,37	1.98	\$	N/A	

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Deb	tor 1	Irene Baby McNeal	_	C	Case i	number (<i>if kn</i>	own)				
						Debtor 1			r Debtor n-filing s		
	Cop	y line 4 here	4.		\$	2,371	.98	\$_		N/A	-
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a		\$	445	21	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		<u>\$</u> —		.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c		\$.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d	l.	\$.00	\$		N/A	_
	5e.	Insurance	5e	٠.	\$	0	.00	\$		N/A	_
	5f.	Domestic support obligations	5f.		\$	0	.00	\$		N/A	-
	5g.	Union dues	5g	١.	\$.45	\$		N/A	- -
	5h.	Other deductions. Specify:	5h	.+	\$	0	.00	+ \$_		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	491	.66	\$_		N/A	_
7.	Calc	sulate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	1,880	.32	\$_		N/A	-
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	8a		\$.00	\$_		N/A	
	8b.	Interest and dividends	8b	٠.	\$	0	.00	\$_		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c		\$	0	.00	\$_		N/A	_
	8d.	Unemployment compensation	8d	l.	\$	0	.00	\$		N/A	-
	8e.	Social Security	8e	٠.	\$	0	.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Section 8 Income	e 8f.		\$	403	.00	\$		N/A	
	8g.	Pension or retirement income	8g	١.	\$	0	.00	\$		N/A	-
	8h.	Other monthly income. Specify:	8h	.+	\$	0	.00	+ \$ _		N/A	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	S	403	.00	\$_		N/A	A
10.	Calc	culate monthly income. Add line 7 + line 9.	10.	\$	•	2,283.32	+ \$		N/A	= \$	2,283.32
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		*-		_,200.02	*		14// (2,200.02
11.	State Inclu	e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not	depe						Schedule	<i>J</i> . +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines							e. 12.	\$Combin	2,283.32 ned
13.	Do v	ou expect an increase or decrease within the year after you file this form	?							monthl	y income
		No.									
	П	Yes, Explain:									

Official Form 106I Schedule I: Your Income page 2

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	to the tate of the tate of the offernous and				
FIII	in this information to identify your case:				
Deb	Irene Baby McNeal			c if this is: An amended filing	
Deb	btor 2		_	J	ving postpetition chapter
(Spo	ouse, if filing)		_ ,	13 expenses as of t	the following date:
Unit	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLII	NOIS	1	MM / DD / YYYY	
Cas	se number				
(If kı	known)				
Of	fficial Form 106J				
So	chedule J: Your Expenses				12/15
Be info nur	as complete and accurate as possible. If two married people a ormation. If more space is needed, attach another sheet to this mber (if known). Answer every question.				
Par 1.	rt 1: Describe Your Household Is this a joint case?				
••	■ No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household?				
	☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, Expense	es for Separate House	hold of Debte	or 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Yes. Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	Son		17	■ Yes
					□ No
					☐ Yes
					□ No
					☐ Yes
					□ No
^	Barrana ann ann an taotada				☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?				
Est exp app	rt 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless penses as of a date after the bankruptcy is filed. If this is a supplicable date.	oplemental <i>Schedule</i>	orm as a sup J, check the	oplement in a Cha e box at the top of	pter 13 case to report f the form and fill in the
the	clude expenses paid for with non-cash government assistance a value of such assistance and have included it on <i>Schedule I:</i> fficial Form 106I.)			Your expe	enses
4.	The rental or home ownership expenses for your residence. payments and any rent for the ground or lot.	. Include first mortgage	4. \$		900.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00
E	4d. Homeowner's association or condominium dues	and an idea to the	4d. \$		0.00
5.	Additional mortgage payments for your residence, such as h	iorne equity ioans	5. \$		0.00

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Debtor 1	Irene Baby McNeal	Case num	ber (if known)	
S. Utiliti			_	
. Utiliti 6a.	es: Electricity, heat, natural gas	6a.	\$	350.00
6b.	Water, sewer, garbage collection	6b.	· · · — — — — — — — — — — — — — — — — —	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	· : ————	
6d.		6d.	·	100.00
	Other. Specify: Internet		*	50.00
	and housekeeping supplies	7.	*	480.00
	care and children's education costs	8.		0.00
	ing, laundry, and dry cleaning	9.	·	150.00
	onal care products and services	10.		100.00
	cal and dental expenses	11.	\$	65.00
	sportation. Include gas, maintenance, bus or train fare. ot include car payments.	12.	\$	150.00
	tainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	table contributions and religious donations	14.	·	0.00
5. Insur	•	17.	–	0.00
	of include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	Health insurance	15b.	·	0.00
	Vehicle insurance	15c.	· -	0.00
	Other insurance. Specify:	15d.		
	s. Do not include taxes deducted from your pay or included in lines 4 or 20.	130.	Ψ	0.00
o. Taxes Speci	, , ,	16.	\$	0.00
7. Insta l	Ilment or lease payments:		·	
17a.	Car payments for Vehicle 1	17a.	· ·	0.00
17b.	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify:	17c.	\$	0.00
17d.	Other. Specify:	17d.	\$	0.00
3. Your	payments of alimony, maintenance, and support that you did not report as			
	cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		0.00
	payments you make to support others who do not live with you.		\$	0.00
Speci	·	19.		
	real property expenses not included in lines 4 or 5 of this form or on Sche			
	Mortgages on other property	20a.	·	0.00
20b.	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e.	Homeowner's association or condominium dues	20e.	\$	0.00
1. Other	: Specify:	21.	+\$	0.00
				
	Ilate your monthly expenses		_	0.045.00
	Add lines 4 through 21.		\$	2,345.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. A	Add line 22a and 22b. The result is your monthly expenses.		\$	2,345.00
3 Calcu	late your monthly net income.		[
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,283.32
	Copy your monthly expenses from line 22c above.	23a. 23b.		2,345.00
۷۵۵.	Copy your monthly expenses nonline 220 above.	۷۵۵.		2,345.00
23c.	Subtract your monthly expenses from your monthly income.		<u></u>	64.60
	The result is your monthly net income.	23c.	\$	-61.68
24. Do v o	ou expect an increase or decrease in your expenses within the year after yo	ou file this	s form?	
For ex	ample, do you expect to finish paying for your car loan within the year or do you expect your			or decrease because of a
	cation to the terms of your mortgage?			
■ No).			
☐ Ye	s. Explain here:			

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Fill in this infor	mation to identify your	case:			
Debtor 1	Irene Baby McNea	I			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
Case number					
(if known)					heck if this is an mended filing
If two married p You must file th obtaining mone	eople are filing together	r, both are equally response. Ie bankruptcy schedule Toonnection with a ban			
	n Below ay or agree to pay some	one who is NOT an atto	rney to help you fill out ba	ankruptcy forms?	
■ No					
_ □ Yes.	Name of person			Attach Bankruptcy Petitic Declaration, and Signatu	
•	alty of perjury, I declare re true and correct.	that I have read the sur	nmary and schedules filed	l with this declaration and	
X /s/ Iren	ne Baby McNeal		X		
	Baby McNeal ure of Debtor 1		Signature of D	Debtor 2	
Date	May 24, 2016		Date		

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Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before I. What is your current marital status? Married Not married							
Debtor 2 First Name	_						
Debtor 2 Segree #, Hings First Name	De	btor 1			Last Name		
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 4/16 2. Bas complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Cert 1: Give Details About Your Marital Status and Where You Lived Before Not married Not married Not married	De	btor 2					
Case number Check if this is an amended filling Check if this is an amended filling Official Form 107 Statement of Financial Affairs for Individuals Filling for Bankruptcy 4/16 Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before I. What is your current marital status? Married I. What is your current marital status? Married I. What is your current marital status? Details and where You live now? II. What is your current marital status? Details and where you live now? II. No Yes. List all of the places you lived in the last 3 years, Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 lived there II. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, Nev Mexico, Puerto Rico, Texas, Washington and Wisconsin.) II. No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Explain the Sources of Your Income I. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income Check all that apply. (Lefore deductions and exclusions) Gross income Check all that apply. (Lefore deductions and exclusions) Wages, commissions,	(Sp	ouse if, filing)	First Name	Middle Name	Last Name		
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy as as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct more remained filing divided as a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part I: Give Details About Your Marital Status and Where You Lived Before I. What is your current marital status? Married No Tried No Tried No Tried ast 3 years, have you lived anywhere other than where you live now? Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Ived there No Tried Address: Dates Debtor 1 Debtor 2 Prior Address: Ived there Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Explain the Sources of Your Income Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) Debtor 1 Sources of income (Defore deductions and exclusions) Debtor 2 Sources of income (Check all that apply. (before deductions and exclusions) Mages, commissions, \$10,377.60 Wages, commissions,	Un	ited States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
Official Form 107 Statement of Financial Affairs for Individuals Filling for Bankruptcy 2 as a complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case unumber (if known). Answer every question. 2 as a complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case unumber (if known). Answer every question. 2 as Complete Andrews: Married							book if this is an
Statement of Financial Affairs for Individuals Filing for Bankruptcy 4/16 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before What is your current marital status?	(11 10					_	
Statement of Financial Affairs for Individuals Filing for Bankruptcy 4/16 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before What is your current marital status?							
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.	Of	ficial Fo	rm 107				
Information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before	St	atement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/16
Part 1: Give Details About Your Marital Status and Where You Lived Before What is your current marital status? Married Not married Not married Not married No married Not							
Part 1: Give Details About Your Marital Status and Where You Lived Before What is your current marital status? Married Not married Not married No more with the last 3 years, have you lived anywhere other than where you live now? No			•	•	this form. On the top of any	y additional pages, write you	ır name and case
Married					Lived Before		
Not married	Гa				Lived Before		
During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 lived there No Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income Did you have any income from employment or from operating a businessed uring this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until Wages, commissions, \$10,377.60 Wages, commissions,	1.	What is your	current marital statu	is?			
During the last 3 years, have you lived anywhere other than where you live now? No		☐ Married					
No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 lived there 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 1. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until Wages, commissions, \$10,377.60		Not mar	ried				
Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 Debtor 2 Debtor 2 Prior Address: Dates Debtor 2 Debtor 2 Debtor 2 Debtor 3 Debtor 4 Debtor 4 Debtor 5 Debtor 5 Debtor 6 Debtor 6 Debtor 6 Debtor 7 Debtor 8 Debtor 9 D	2.	During the la	ıst 3 years, have you	lived anywhere other than	where you live now?		
Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 Debtor 2 Debtor 2 Prior Address: Dates Debtor 2 Debtor 2 Debtor 2 Debtor 3 Debtor 4 Debtor 4 Debtor 5 Debtor 5 Debtor 6 Debtor 6 Debtor 6 Debtor 7 Debtor 8 Debtor 9 D		■ No					
lived there		_	t all of the places you I	ived in the last 3 years. Do no	ot include where you live now	<i>1</i> .	
lived there		Debtor 1 Pri	or Address:	Dates Debtor 1	Debtor 2 Prior Ad	dress:	Dates Debtor 2
No No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income		Debtor 1111	Address.		DODIOI Z I HOI AC	ui 000.	
No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptor. Wages, commissions,	3. stat						
Tyes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 1. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No No Pebtor 1 Sources of income Check all that apply. Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptory. Wages, commissions, \$10,377.60 □ Wages, commissions,		_	,	, ,	,	, ,	,
Explain the Sources of Your Income 1. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No No Pebtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the data you filed for bankruntor: Wages, commissions, \$10,377.60 Wages, commissions,		_	ke sure vou fill out <i>Scl</i>	hedule H [.] Your Codebtors (O	fficial Form 106H)		
From January 1 of current year until the data you filed for hankruntory. 1. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. Debtor 1 Sources of income (before deductions and exclusions) From January 1 of current year until the data you filed for hankruntory. Wages, commissions,			ice date you till out our	Todale 11. Toda Godestore (O	modification room.		
Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No No Pettor 1 Sources of income Check all that apply. Pettor 2 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruntory. Wages, commissions, \$10,377.60 Wages, commissions,	Pa	rt 2 Explai	n the Sources of You	r Income			
Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruntey: Wages, commissions, \$10,377.60 Wages, commissions,	4.	Fill in the tota	I amount of income yo	u received from all jobs and a	all businesses, including part	time activities.	ndar years?
Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruntey: Wages, commissions, \$10,377.60 Wages, commissions,		П №					
Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for hapkruntey: Wages, commissions, \$10,377.60 Wages, commissions,			in the details.				
Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for hapkruntey: Wages, commissions, \$10,377.60 Wages, commissions,				Dobtov 4		Dobtov 2	
Check all that apply. Check all that apply. (before deductions and exclusions) Check all that apply. Check all that apply. (before deductions and exclusions) From January 1 of current year until the date you filed for bankruntey: **The date you filed fo					Gross income		Gross income
the date you filed for hankruntcy:					(before deductions and		(before deductions
				•	\$10,377.60	=	
☐ Operating a business ☐ Operating a business				☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 Irene Baby McNeal

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2015)	■ Wages, commissions, bonuses, tips	\$28,870.00	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
For the calendar year before that: (January 1 to December 31, 2014)	■ Wages, commissions, bonuses, tips	\$24,554.00	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
Include income regardless of wheth and other public benefit payments; winnings. If you are filing a joint cas List each source and the gross inco	pensions; rental income; interse and you have income that y	ou received together, list it o	nly once under Debtor 1.	nd gambling and lotter
and other public benefit payments; winnings. If you are filing a joint cas	pensions; rental income; interse and you have income that y	ou received together, list it o	nly once under Debtor 1.	nd gambling and lotter
and other public benefit payments; winnings. If you are filing a joint cas List each source and the gross inco No	pensions; rental income; interse and you have income that y	ou received together, list it o	nly once under Debtor 1.	nd gambling and lotter
and other public benefit payments; winnings. If you are filing a joint cas List each source and the gross inco No	pensions; rental income; interse and you have income that younge from each source separa	ou received together, list it o	only once under Debtor 1.	Gross income (before deductions) and exclusions)
and other public benefit payments; winnings. If you are filing a joint cas List each source and the gross inco No	pensions; rental income; interse and you have income that your from each source separate Debtor 1 Sources of income	cou received together, list it of tely. Do not include income the tely. Do not include income the tely. Gross income from each source (before deductions and	nat you listed in line 4. Debtor 2 Sources of income	Gross income (before deductions
and other public benefit payments; winnings. If you are filing a joint cas List each source and the gross inco. No Yes. Fill in the details. From January 1 of current year until	pensions; rental income; interse and you have income that your from each source separated by the separated by the second separated by the second separated by the second s	coureceived together, list it of tely. Do not include income the tely. Do not include income the tely. Gross income from each source (before deductions and exclusions)	nat you listed in line 4. Debtor 2 Sources of income	Gross income (before deductions

□ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

□ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address Dates of payment **Total amount** Amount you Was this payment for ... still owe paid

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Case number (if known) Document Debtor 1 Irene Baby McNeal

7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any ger control, or owner of 20% of	neral partners; partners partners or more of their voting	erships of which yo g securities; and ar	u are a generary ny managing a	al partner; corporations agent, including one for
	No					
	Yes. List all payments to an insider.				- <i>'</i>	41
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a d	ebt that benefited an
	■ No					
	Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Pai	t 4: Identify Legal Actions, Repossession	ns. and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.	w.	erty repossessed, f	oreclosed, garnis	hed, attache	d, seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happene	d			
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No ☐ Yes. Fill in the details. Creditor Name and Address				i, set off any a	amounts from your Amount
				taken		
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possess	ion of an assigne	e for the ben	efit of creditors, a
Pai	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	otcy, did you give any gift	s with a total value	of more than \$60	0 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the g	s you gave ifts	Value
	Person to Whom You Gave the Gift and Address:					

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14.	Within 2 years before you filed for bank No			ns with a tota	I value of more than	\$600 to any charity?
	☐ Yes. Fill in the details for each gift or Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co	total	on. Describe what you contributed		Dates you contributed	Value
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for banks or gambling?	ruptcy or	since you filed for bankruptcy, did y	you lose anyt	hing because of thef	t, fire, other disaster,
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the lette amount that insurance has paid. It ce claims on line 33 of Schedule A/B:	_ist pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfe		oo damii on mio oo di conoddio 112.	r roporty.		
16.	Within 1 year before you filed for banks consulted about seeking bankruptcy o Include any attorneys, bankruptcy petition No Yes. Fill in the details.	r preparin	ng a bankruptcy petition?			rty to anyone you
	Person Who Was Paid		Description and value of any prop	erty	Date payment	Amount of
	Address Email or website address Person Who Made the Payment, if Not	You	transferred	•	or transfer was made	payment
	STAHULAK & ASSOCIATES, L.L.C 53 W. Jackson Blvd., Suite 652 Chicago, IL 60604		\$1,439.00 (\$335.00 Filing Fee, \$ Credit Report, \$1,049.00 Atty Fe		03/28/2016	\$1,439.00
	Green Path Debt Solutions 38505 Country Club Drive Farmington, MI 48331		\$35.00 Credit Counseling		05/20/2016	\$35.00
17.	Within 1 year before you filed for banks promised to help you deal with your cr Do not include any payment or transfer th	editors or	to make payments to your creditor		r transfer any prope	rty to anyone who
	■ No					
	Yes. Fill in the details. Person Who Was Paid		Description and value of any prop	ortv	Data navment	Amount of
	Address		transferred	lerty	Date payment or transfer was made	payment
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No					
	Yes. Fill in the details.		B 1.0			
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made
	Person's relationship to you					

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Irene Baby McNeal Debtor 1

19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-production No		ny property to a	self-settle	ed trust or similar device	∍ of which yo	ou are a
	☐ Yes. Fill in the details.						
	Name of trust	Description and	value of the pro	perty trans	sferred	Date Tran	isfer was
Pa	rt 8: List of Certain Financial Accounts, Ins	truments, Safe Depos	it Boxes, and S	torage Unit	ts		
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, assoc No Yes. Fill in the details.	r other financial accou	unts; certificate:	s of deposi		•	,
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accoinstrument	unt or	Date account was closed, sold, moved, or transferred		st balance closing or transfer
21.	Do you now have, or did you have within 1 yeash, or other valuables?	ear before you filed fo	or bankruptcy, a	ny safe de	posit box or other depo	sitory for sec	curities,
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe	the contents	Do you have it	
22.	Have you stored property in a storage unit o No Yes. Fill in the details.	r place other than you	ır home within 1	l year befo	re you filed for bankrup	tcy?	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you have it	
Pa	rt 9: Identify Property You Hold or Control f	for Someone Else					
23.	Do you hold or control any property that son for someone.	neone else owns? Inc	lude any prope	rty you bor	rowed from, are storing	for, or hold	in trust
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City,		Describe	the property		Value
Pa	rt 10: Give Details About Environmental Info	Code)					
	the purpose of Part 10, the following definition						
	Environmental law means any federal, state, toxic substances, wastes, or material into th regulations controlling the cleanup of these	e air, land, soil, surfac	ce water, groun	• .			
	Site means any location, facility, or property to own, operate, or utilize it, including dispos		environmental	law, wheth	ner you now own, opera	te, or utilize i	it or used
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,				е,		

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

hazardous material, pollutant, contaminant, or similar term.

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Debtor 1 Irene Baby McNeal

24.	4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No						
	Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code	Governmental unit Address (Number, Street, City, State ZIP Code)	Environmental law, if you Date of notice know it				
25.	Have you notified any governmental unit	t of any release of hazardous material?	1?				
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code	Governmental unit Address (Number, Street, City, State ZIP Code)	Environmental law, if you Date of notice know it				
26.	Have you been a party in any judicial or	administrative proceeding under any e	environmental law? Include settlements and orders.				
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case Status of the case				
Par	t 11: Give Details About Your Business	or Connections to Any Business					
27.	Within 4 years before you filed for bankr	uptcy, did you own a business or have	ve any of the following connections to any business?				
	☐ A sole proprietor or self-employe	ed in a trade, profession, or other activ	ivity, either full-time or part-time				
	☐ A member of a limited liability co	ompany (LLC) or limited liability partne	ership (LLP)				
	☐ A partner in a partnership						
	☐ An officer, director, or managing	executive of a corporation					
	☐ An owner of at least 5% of the vo	oting or equity securities of a corporati	ation				
	No. None of the above applies. Go	to Part 12.					
	☐ Yes. Check all that apply above and	I fill in the details below for each busin	iness.				
	Business Name	Describe the nature of the busine	r y r r r r r r r r r r r r r r r r r r				
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeep	Do not include Social Security number or ITIN. per Dates business existed				
28.	Within 2 years before you filed for bankr institutions, creditors, or other parties.	ruptcy, did you give a financial stateme	nent to anyone about your business? Include all financial				
	■ No □ Yes. Fill in the details below.						
	Name Address (Number, Street, City, State and ZIP Code)	Name Date Issued Address					
	· · · · · · · · · · · · · · · · · · ·						

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Debtor 1 Irene Baby McNeal

are true and correct. I understand that	nent of Financial Affairs and any attachments, and I declare making a false statement, concealing property, or obtaining up to \$250,000, or imprisonment for up to 20 years, or be	g money or property by fraud in connection
/s/ Irene Baby McNeal		
Irene Baby McNeal	Signature of Debtor 2	
Signature of Debtor 1	•	
Date May 24, 2016	Date	
_ '	r Statement of Financial Affairs for Individuals Filing for Ba	ankruptcy (Official Form 107)?
No		
☐ Yes		
Did you pay or agree to pay someone v	who is not an attorney to help you fill out bankruptcy forms	?
No		

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this informa	ation to identify w	our case:		
Debtor 1	Irene Baby Mc	Neal Middle Name	Last Name	
Debtor 2	T HOC TYGING	Wildele Harrie	Last Hamo	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bank	kruptcy Court for th	e: NORTHERN DIST	TRICT OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing
				.
Official For		ion for India	iduala Filina Undar Cl	antor 7
Statemen	t of Intent	ion for indiv	iduals Filing Under Cl	napter / 12/15
If you are an indivi	idual filing under	chapter 7, you must fill	out this form if:	
	•	your property, or	. • • • • • • • • • • • • • • • • • • •	
_		ty and the lease has no	ot expired.	
You must file this	form with the cou er is earlier, unles	rt within 30 days after	you file your bankruptcy petition or by the time for cause. You must also send cop	
	ple are filing toge date the form.	ther in a joint case, bo	th are equally responsible for supplying o	correct information. Both debtors must
		ssible. If more space is number (if known).	needed, attach a separate sheet to this f	orm. On the top of any additional pages,
Part 1: List You	ır Creditors Who	Have Secured Claims		
1. For any creditor information below	•	n Part 1 of Schedule D	: Creditors Who Have Claims Secured by	Property (Official Form 106D), fill in the
		rty that is collateral	What do you intend to do with the prop secures a debt?	Did you claim the property as exempt on Schedule C?
	ntander Consum	er USA	Surrender the property.	■ No
name:			Retain the property and redeem it.	☐ Yes
Description of	2005 Suzuki Fo	enza 100.000	Retain the property and enter into a Reaffirmation Agreement.	□ res
property	miles		Retain the property and [explain]:	
securing debt:	Debtor to Surrer	nder.		
De d'O		ID		
		onal Property Leases v lease that you listed	in Schedule G: Executory Contracts and	Unexpired Leases (Official Form 106G), fill
in the information	below. Do not list	real estate leases. Un	expired leases are leases that are still in the trustee does not assume it. 11 U.S.C.	effect; the lease period has not yet ended.
Describe your un	expired personal	property leases		Will the lease be assumed?
Lessor's name:	Ms. Thoma	3		□ No
LC3301 3 Harrie.	ivis. Triorna	•		□ No
				Yes
Description of leas Property:	ed Monthly Ap	artment Lease		
i roporty.				
	_			
Part 3: Sign Be	low			

Official Form 108

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Deb	tor 1 _	rene Baby McNeal	Case number (if known)
			icated my intention about any property of my estate that secures a debt and any personal
Х	/s/ Iren	t is subject to an unexpired lease. ne Baby McNeal Baby McNeal	X Signature of Debtor 2
		ure of Debtor 1	
	Date	May 24, 2016	Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee	
+	\$75	administrative fee	
	\$310	total fee	

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-17467 Doc 1 Filed 05/24/16 Entered 05/24/16 16:28:02 Desc Main Document Page 51 of 56

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In r			Case No.				
		ebtor(s)	Chapter	7			
	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)						
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:						
	For legal services, I have agreed to accept		\$	1,439.00			
	Prior to the filing of this statement I have received		\$	1,439.00			
	Balance Due		\$	0.00			
2.	\$_335.00 of the filing fee has been paid.						
3.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
4.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
5.	■ I have not agreed to share the above-disclosed compensation with	any other person unless	they are meml	bers and associates of my law firm.			
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.						
6.	In return for the above-disclosed fee, I have agreed to render legal serv	vice for all aspects of the	bankruptcy c	ase, including:			
 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] 							
7. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.							
	CERTIFIC	CATION					
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.							
		Thomas G. Stahulak					
1		omas G. Stahulak 628 <i>nature of Attorney</i>	88620				
Stahulak & Associates, L.L.C. / GetFiled							
	53 W. Jackson Blvd., Suite 652 Chicago, IL 60604						
	(31	2) 662-1480 Fax: (3		S			
		@stahulakandassocia me of law firm	ates.com				
	1100	nie oj tem jimi					

United States Bankruptcy Court Northern District of Illinois

In re	Irene Baby McNeal		Case No.		
		Debtor(s)	Chapter	7	
	VER	IFICATION OF CREDITOR MAT	ΓRIX		
		Number of Creditors:3			
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.				
Date:	May 24, 2016	/s/ Irene Baby McNeal Irene Baby McNeal Signature of Debtor			

Alicare PO BOX 5435 White Plains, NY 10602

American Financial Cre 10333 N Meridian St Ste Indianapolis, IN 46290

Caine & Weiner Po Box 5010 Woodland Hills, CA 91365

Carmax Service Center 101 N Wolf Rd, Suite 8 Hillside, IL 60162

Central Credit Services LLC 20 Corporate Hills Dr Saint Charles, MO 63301-3749

Chase Receivables 1247 Broadway Sonoma, CA 95476

Citibank P.O. box 6500 Sioux Falls, SD 57117

Comcast 1255 W. North Ave Chicago, IL 60622

ComEd P.O. Box 805379 Chicago, IL 60680

Diversified Consultant Dci Po Box 551268 Jacksonville, FL 32255

ERC/Enhanced Recovery Corp 8014 Bayberry Rd Jacksonville, FL 32256 Figis
3200 S Central Ave
Marshfield, WI 54449

GC Service 6330 Gulfton Street Houston, TX 77081-4441

Great Lakes Specialty Finance, Inc. dba: Check 'n Go 800 N Kedzie Chicago, IL 60651

H&R Block PO Box 677463 Dallas, TX 75267

LJ Ross Associates Inc P.O. Box 6099 Jackson, MI 49204

Massey's PO Box 2822 Monroe, WI 53566

Med Business Bureau 1460 Renaissance Dr Suite 400 Park Ridge, IL 60068

Northwest Pulmonary Assoc 7447 W Talcott Ave Suite 542 Chicago, IL 60631

Paul V Fahrenbach, MD 7447 W Talcott Suite 209 Chicago, IL 60631

Pay As You Go 800 N. Kedzie Chicago, IL 60651 Peoples Gas C/O Bankruptcy Department 130 E. Randoph Drive Chicago, IL 60602

PNC Bank 2730 Liberty Ave Pittsburgh, PA 15222

Presence Health 100 North River Road Des Plaines, IL 60016

RM Anesthesia LLC PO Box 631 Lake Forest, IL 60045

RMC Pathology Associates 520 E 22nd St Lombard, IL 60148

Saints Mary and Elizabeth Medical Center 1117 Paysphere Circle Chicago, IL 60674

Sallie Mae - Dept. of Education PO BOX 740351 Atlanta, GA 30374

Santander Consumer USA Po Box 961245 Fort Worth, TX 76161

Social Security Administration P.O. Box 3430 Philadelphia, PA 19122

Social Security Administration Great Lakes Program Service Ctr. 600 W. Madison St. Chicago, IL 60661-2474 Sylvan Learning Center 610 S Maple Suite 1550 Oak Park, IL 60304

Synchrony Bank/Home Shopping Attn: Bankruptcy Po Box 103104 Roswell, GA 30076

Synchrony Bank/TJX Attn: Bankruptcy Po Box 103104 Roswell, GA 30076

TCF Bank 800 Burr Ridge Pkwy Burr Ridge, IL 60527

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